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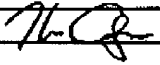
PTO/SB/21 (08-03)


Approved for use through 08/30/2003. OMB 0851-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/034,198	
	Filing Date	12/20/2001	
	First Named Inventor	Oliver Schnell	
	Art Unit	1646	
	Examiner Name		
Total Number of Pages in This Submission	3	Attorney Docket Number	BETPT77

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Thomas M. Champagne IP Strategies, P.C.	
Signature		
Date	06/09/2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Thomas M. Champagne	
Signature		Date 06/09/2004

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

JUN 09 2004

Application No.	Filing Date	First Named Inventor	Atty. Docket No.	Confirmation No.
10/034,196	12/20/2001	Oliver Schnell	BETPT77	7748

Invention	Examiner	Art Unit
Method and device for producing an adapted travel treatment plan for administering a medicine in the event of a long-haul journey		1646

STATUS REQUEST

Commissioner for Patents
P.O. Box 1450
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Sir:

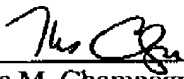
Please let us know the status of the above-identified application and when an Action can be expected. This is the fifth status request submitted in the application.

Respectfully submitted,

June 9, 2004

Date

TMC:hlp


Thomas M. Champagne
Registration No. 36,478
IP STRATEGIES
12-1/2 Wall Street
Suite I
Asheville, North Carolina 28801
828.253.8600
828.253.8620 fax